

**Complete Form, Print, Sign and Mail to:**  
Public Service Commission of South Carolina  
101 Executive Center Dr., Suite 100  
Columbia, SC 29210



Phone: 803-896-5100

Fax: 803-896-5199

www.psc.sc.gov

Text PSCAGENDAS to 39492

To receive an alert when Meeting Agendas are released

## Individual Complaint Form

Date\*: 06/04/2018

### Complainant or Legal Representative Information: \* Required Fields

Name \* Charles Hawkins

Firm (if applicable)

Mailing Address \* 28 Kavanagh Ct

City, State Zip \* Greenville SC 29611 Phone \* 864-360-0819

E-mail ccs\_hawkins@att.net

Name of Utility Involved in Complaint: \* Duke Energy

### Type of Complaint (check appropriate box below): \*

- |   |  |  |   |
|---|--|--|---|
| <input checked="" type="checkbox"/> Billing Error/Adjustments | <input type="checkbox"/> Deposits and Credit Establishment | <input type="checkbox"/> Wrong Rate    | <input type="checkbox"/> Refusal to Connect Service |
| <input checked="" type="checkbox"/> Disconnection of Service  | <input checked="" type="checkbox"/> Payment Arrangements   | <input type="checkbox"/> Water Quality | <input type="checkbox"/> Line Extension Issue       |
| <input checked="" type="checkbox"/> Service Issue             | <input type="checkbox"/> Meter Issue                       |  |   |
| <input type="checkbox"/> Other (be specific)                  |  |  |   |

Have you contacted the Office of Regulatory Staff (ORS)? \* ☒ Yes ☐ No Name of ORS Contact:

### Concise Statement of Facts/Complaint: \* (This section must be completed. Attach additional information to this page if necessary.)

I asked Duke Energy to check my meter because my bill has been going up and I have been in North Carolina at Duke Medical Center with my disabled wife. I have turned in a medical form to alert Duke Energy of my wife health issues. Duke energy has stated that I haven't contacted them in three months which is not correct. They also didn't check my usage to see if there was an error. I had no choice but to make an arrangement for a \$900.00 payment to keep service with the understanding that I would seek help from an assistant agency. I was advised that the agency could take up to 1 week to communicate with Duke Energy I'm facing disconnection. Ms/Mrs Robingson reinstated a arrangment and didnt advise me of this via letter.

### Relief Requested: \* (This section must be completed. Attach additional information to this page if necessary.)

Stop disconnection on the 06/05/2018. Except my \$200 today and what ever the agency gives towards my bill this week.  
Make all my arrangements for \$250 on the 3rd of ever month until I'm caught up.  
Could be life threatening if my power is disconnected. If not, I can pay 300 today and 640 on Friday the 8/10/2018

**\*\*I GIVE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA PERMISSION TO PUBLISH THIS COMPLAINT AND ITS CONTENTS ON THE COMMISSION'S WEBSITE (dms.psc.sc.gov), AND I UNDERSTAND SUCH INFORMATION MAY BE SUBJECT TO PUBLIC SCRUTINY OR FURTHER RELEASE.** ☒ Yes ☐ No

STATE OF SOUTH CAROLINA )  
COUNTY OF Greenville )

### VERIFICATION

1. Charles Hawkins

Complainant's Name \*

verify that I have read my complaint filed on 6/4/18

Date \*

and know the contents thereof, and that said contents are true.

X Charles Hawkins

Complainant's Signature \* (MUST BE SIGNED, DO NOT PRINT)

Internal Use Only

Processed By	Date